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TO:	Registration Se Division of Cor		1 1 t	•		
CHR IF	A J EXCEI	LLENȚ LIMO SERVICE LLC	<i>,</i> •			
SUBJEC		Name of Lim	ited Liability Company			
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	eturn all correspo	ondence concerning this matter	to the following:			
			ADRAS, JOSUE			
			Name of Person			
			A J EXCELLENT LIMO SERV	ICE LLC		2
			Firm/Company	-	·	822 /
			2800 NW 56TH AVE APT	C 108	14 14 17 14 17 15	APR 2
			Address		MANY OF	25 PM
		LAUDERHILL FLORIDA	LAUDERHILL FLORIDA 33313		- 45	
			City/State and Zip Code		3	
		JOSUE15ADRAS@GMAI				100
		E-mail address: (to be used for future annual report n	otification)		
For furth	ner information c	concerning this matter, please c	all:			
ADR.	AS, JOSUE		954 225-7827 at ()			
	Name o	f Person		ime Telephone Number		
Enclosed	d is a check for t	he following amount:				
□ \$25.	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
	Mailing Address Registration S Division of C	Section Corporations	Street Address: Registration S Division of C	Section forporations		
	P.O. Box 632	27	The Centre of	Tallahassee	^	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

АЈЕ	EXCELLENT LIMO SERVICE LLC		
(Name of the Limi	ted Liability Company as it now appears of (A Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited L Florida document number <u>L22000163480</u>		04/05/2022	and assigned
This amendment is submitted to amend the fol-	lowing:		
A. If amending name, enter the new name of	of the limited liability company here	2:	
The new name must be distinguishable and contain the Enter new principal offices address, if applied		gnation "LLC" or the ab	breviation "L.I.C."
(Principal office address MUST BE A STREE	ET ADDRESS)		70
		<u>. </u>	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)		PH 2: 02
B. If amending the registered agent and/or agent and/or the new registered office addre	•	ords, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:	JOSUE ADRAS		
New Registered Office Address:	2800 NW 56TH AVE APT C108		
	Enter Floride	AVE APT C108 Enter Florida street address	
	LAUDERHILL	Florida _ ^{33.}	313
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	JOSUE ADRAS	2800 NW 56TH AVE APT C108 LAUDERHILL, F	
			□Remove
			□Change
			🗆 Add
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ffective date, if other than the date of filing:	(optional)
an effective date is listed, the date must be specific and cannot be pri	(optional) for to date of filing or more than 90 days after filing.) Pursuant to 605.020 licable statutory filing requirements, this date will not be listed as
locument's effective date on the Department of State's record	ds.
record specifies a delayed effective date, but not an effective d is filed.	time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Pated APRIL 21 2022	·
Lade	
Signature of member or au	thorized representative of a member
locure .	DB 3.6
JOSUE A	MANAS